
Q&A: Early Psychosis Youth Services (EPYS) Program – Lead Agency (PAC096A)

1. Question

Has CHN engaged in any consultation activities during the planning process for this service that potential applicants can draw upon?

Answer

CHN has been participating in the Child & Youth Mental Health Services Alliance (CYMHSA) and providing updates on the EPYS Program to the CYMHSA Service Development Working Group. This working group has met three times since establishment and aims to support the development and implementation of new mental health projects and/or services for children and young people in the ACT. Minutes from these meetings can be provided to potential applicants- please contact tenders@chnact.org.au to request access.

2. Question

Does the service need to sit within the headspace Canberra site or can it be in a separate building, as long as it integrates?

Answer

The ACT Early Psychosis Youth Services (EPYS) Program will be operating as an integrated service with headspace Canberra. Capital Health Network are procuring a property consultant to assist in the acquisition of an appropriate operational site for these services, and this process will involve an exploration of the operational needs for both headspace Primary and Early Psychosis with their respective lead agencies.

As integrating these services is a key priority, preference will be given to locating both the Primary and Early Psychosis teams within the same site. If no suitable site is identified through the property search, consideration will be given to alternative options, including the use of separate spaces or premises.

3. Question

Will the EPYS in the ACT be operating as a hub-and-spoke model, and if so, which headspace sites will fill which operational roles?

Answer

The ACT EPYS Program will be operating in a hub-outreach format. This has been identified by CHN as the most appropriate approach for addressing the needs of the Canberra community. headspace Canberra will serve as the hub site, with the option to provide outreach services at headspace Tuggeranong. This will be complemented by the mobile services provided by the hEP team, as detailed further in the EPPIC Model and Service Implementation Guide.

4. Question

Are you able to provide any further information about Grand Pacific Health as the current lead agency for the ACT headspace centres, including their consortium membership?

Answer

Any questions regarding headspace Canberra and Tuggeranong can be directed to **Kellie Kembrey**, Executive Manager Quality and Business Development for Grand Pacific Health (kkembrey@gph.org.au). **Please note** that Grand Pacific Health are not currently able to provide information about their consortium membership.

Grand Pacific Health have informed CHN that they are not providing letters of support, nor endorsing, individual providers. A letter of commitment to work with the successful tenderer has been provided to CHN and can be found on the CHN website under this tender opportunity. Tender applicants do not need to contact Grand Pacific Health for proof of support of their application.

5. Question

Are applicants able to provide additional documentation to supplement answers provided to the questions in the RFP Response Form?

Answer

Capital Health Network will accept additional supporting documentation (for example, a risk management plan) in response to the RFP assessment items. These will be considered in addition to the maximum word count identified for each question. However, additional documentation will not be eligible for consideration if utilised to extend the word count. Any supporting items should only supplement and/or provide relevant insight into your written response.

6. Question

The average age for the onset of first-episode psychosis (FEP) is 18-25, and this cohort may currently be presenting to & managed by Canberra Head to Health. What is this vision for the integration of hEP with the Head to Health service?

Answer

Partnerships with local services and other stakeholders is both a principle and core component of the EPPIC Model. The successful lead agency for the ACT EPYS Program will be able to demonstrate a comprehensive understanding of the mental health service landscape in the ACT, including services that may currently provide care to young people (aged 12-25) experiencing significant mental health challenges. Potential applicants should ensure that this understanding is reflected in their written responses, including considerations for establishing key inter-service partnerships, fostering communication, and ensuring that the hEP service is effectively integrated into the mental health system. CHN will support the successful lead agency to develop these relationships in order to provide the best possible care to young people in need.

7. Question

Are you able to provide a contact within Canberra Health Services to facilitate communication with potential tender applicants?

Answer

Questions and communication for Canberra Health Services (CHS) can be directed to **Sarah Toohey**, Senior Manager Specialist Teams for the Child and Adolescent Mental Health Service (CAMHS) within CHS (sarah.toohey@act.gov.au, 02 5124 6543). **Please note;** Sarah has requested that all contact be directed to her email address as a first preference, and she will arrange follow-up phone calls if necessary.

8. Question

Are you able to provide further information on the scope and remit of the Specialist Youth Mental Health Outreach (SYMHO) team, including their workforce profile, to support appropriate planning and applications?

Answer

The SYMHO team provides support and treatment for young people aged 14-25 who are experiencing first episode psychosis, and those aged 14-18 at ultra-high risk of developing psychosis. This service is operated by Canberra Health Services, and referrals are made through CAMHS or Access Mental Health. Any further questions regarding the SYMHO service can be directed to **Sarah Toohey**, Senior Manager Specialist Teams for the Child and Adolescent

Mental Health Service (CAMHS) within CHS (sarah.toohey@act.gov.au, 02 5124 6543). **Please note;** Sarah has requested that all contact be directed to her email address as a first preference, and she will arrange follow-up phone calls if necessary.

9. Question

What is the likely timeline for a property for headspace Canberra and the ACT hEP service to be identified?

Answer

Capital Health Network are currently internally progressing the development of an RFP to procure a property consultant. Procurement timelines for the EPYS lead agency and the property consultant will overlap, allowing the property consultant to begin their activities as soon as possible, followed by site consultations with the lead agency and other key stakeholders once this provider is onboard.

This RFP is expected to be released to the public by the end of July. CHN is aiming to finalise the property consultant contract by mid-September, with the selected site/s acquired by the end of October. This schedule is indicative only and may change throughout the course of this procurement process.

10. Question

Will you provide a budget template for applicants to use?

Answer

Capital Health Network do not typically provide budget templates for applicants to complete. Providers are encouraged to detail a projected budget in their preferred format, provided all elements identified in the assessment criteria description have been appropriately considered.

11. Question

Is the EPYS team required to provide 24/7 support?

Answer

The hEP service is not required to provide 24/7 support. To facilitate access to mental health care for young people, the hEP team will aim to provide a minimum level of services 7 days per week, including capacity outside of standard business hours- however, this is not expected at the commencement of service delivery and may be addressed through the scaling-up of the service. Exact operational needs will be determined through contract negotiation, assessments of consumer demand, and model localisation processes. The lead agency will also be expected to develop pathways to accessing support 24/7 for individuals who may be urgently in need- for example, via partnerships with other community mental health services, crisis teams, or acute care services.

12. Question

The RFP document mentions an anticipated full workforce of 25-30 FTE, which is expected to be reached around 18 months to 2 years into service delivery. Is it possible to get an idea of what workforce FTE is expected (as a minimum) for service delivery commencement on 1 April 2024?

Answer

CHN is not able to provide a specific figure as to expected workforce FTE at service commencement. This number will depend on numerous factors, including the results of model localisation activities, partnerships and integration with other services, community engagement, and efficacy of recruitment. It is expected that the hEP service will initially be able to deliver the core functions of the model, including clinical and operational leadership. However, minimum service provision at commencement will be discussed with the preferred provider during contract negotiation.

Applicants should consult the EPPIC Model and Service Implementation Guide for further detail regarding minimum operational requirements and the scaling-up process- noting that the hEP service cannot commence without the

appointment of a Clinical Director (psychiatrist), among other key positions. Innovative approaches to initial service provision will be considered, provided they maintain core features of the EPPIC Model. Orygen will assist the successful lead agency to assess fidelity to the EPPIC Model throughout the ongoing scale-up of services.

13. Question

Page 11 of the Tender specifications - Part D: Additional Requirements, Assurance and Compliance Considerations refers to 'Accreditation/Registration certification (as appropriate)'. Are you able to specifically confirm what these incorporate?

Answer

The 'Accreditation/Registration certification (as appropriate)' criterion is a standard inclusion in CHN's Request for Proposal documents, inviting potential applicants to provide details of any accreditation or registration relevant to the RFP and their area of service delivery. For example, one application for a past CHN tender opportunity listed that the organisation had been accredited against the QIC Health and Community Services Standards.

For the Early Psychosis Youth Services (EPYS) Program – Lead Agency (PAC096A) RFP, no specific accreditation/registration/certification/etc. is being requested- instead, we encourage applicants to consider the nature of this service and detail any assurance/s their organisation holds that could support their written responses.

14. Question

In relation to the building and EPYS fit-out and furnishing, does CHN have guidance in relation to consideration of these costs in the EPYS provider's budget?

Answer

As the site procurement process is ongoing, CHN is not able to provide exact costings associated with any building/fit-out/furnishing activities. A site of approximately 1000-1200m² is being sought for the combined headspace Canberra and hEP services, and applicants are encouraged to research and extrapolate estimated site costs based on this figure. All site costs should be budgeted for within the 2022-23 establishment funding.

The successful provider will not be required to deliver on the exact costings identified in their itemised budget submission. Itemised budget submissions as part of this proposal should be estimates only. Site costs are expected to vary based on the final selected property, fit-out needs (including labour), and contributions from headspace Canberra. CHN wishes to ensure that applicants are able to consider all budgetary needs associated with the service and that any planning is appropriate and realistic. The final service budget, including all site costs, will be negotiated with the preferred lead agency during contract discussions.

15. Question

Can you define 'Service delivery administrative & other costs' on page 11 in the 'Budget and Value for Money' section of the RFP document?

Answer

Administrative and other costs refer to costs required to operate the service that do not directly relate to provision of client services. This does not include property rental costs but does include other overhead costs such as accountancy and bookkeeping, cleaning, utilities and office supplies. CHN encourage flexibility in budget proposals and will work with the successful tenderer on the breakdown of service delivery administrative and other costs through the contract negotiation process.